

Agenda Item	
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Report to (Full Council)



Date of Meeting	13 th October 2021
Portfolio	Healthy Lives
Report Author	Claire Richardson
Public/Private Document	Public

Establishment of Shadow System Board

Executive Summary

- 1.0 This report aims to:
- Set the context for the establishment of the Shadow System Board
 - Describe the subsequent requirements for the current governance arrangements, including the Strategic Place Board, the Clinical Commissioning Group Governing Body and the Integrated Commissioning Board
 - Set out a series of recommendations required to establish the Shadow System Board from October 2021
- 1.1 In November 2020 “Integrating Care: Next steps to building strong and effective integrated care systems across England” and subsequent White Paper published in February 2021, set out proposals to:
- Improve population health and healthcare
 - Tackle unequal outcomes and access
 - Enhance productivity and value for money
 - Help to support broader social and economic development
- 1.2 One of the key elements outlined was the “Principle of Subsidiarity” which described the requirement for more functions and resources to be devolved from national and regional levels to local systems to ensure:
- decisions are taken closer to communities
 - collaboration between partners in a place
 - collaboration between providers
- 1.3 The White Paper therefore aligns to the Greater Manchester Devolution agenda and our Rochdale Locality ambition for PLACE to have primacy and to

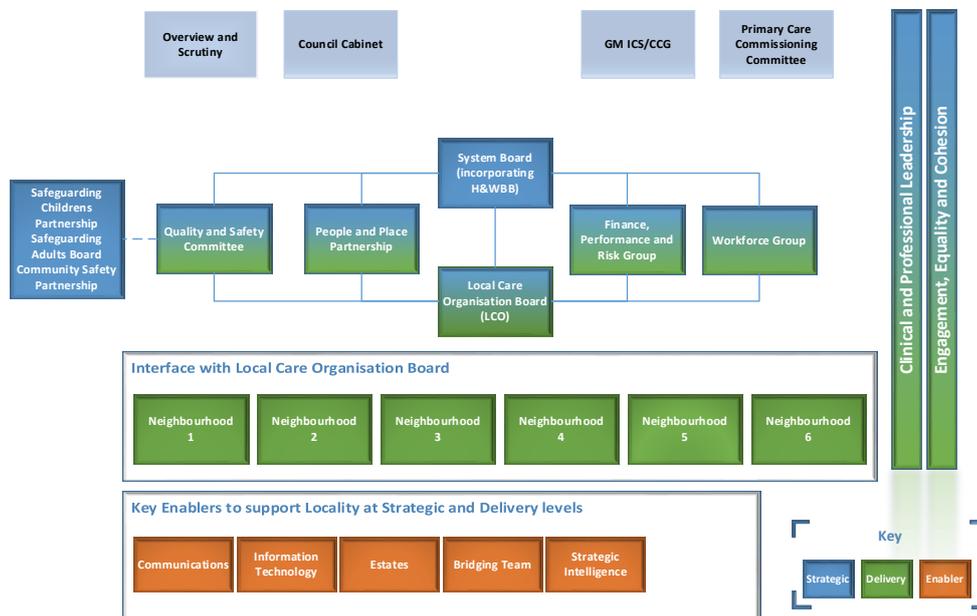
continue to build on the existing integration across the health and care system, through the further development of the Local Care Organisation (LCO).

1.4 In line with further guidance and working across Greater Manchester, the North East Sector and our Rochdale system the Rochdale Locality Construct has been developed with the following three key elements (See figure 1):

- **System Board:** Responsible for setting the strategic direction for the locality and the board this paper seeks to establish in shadow form
- **Local Care Organisation Board:** Already established bringing together provider and commissioner partners from across health and care, including the voluntary sector, to deliver services in the best way to improve outcomes for the population.
- **Neighbourhoods:** Integrating services around local people, creating a system of multi-agency professionals from all public services working together. Delivery will be person-centred and take a proactive and preventative approach, intervening early and responding to the person in the context of their community

Figure 1: Proposed Rochdale Locality Construct

Note: Overview and Scrutiny and Council Cabinet provided for illustrative proposes only



1.5 The System Board will need to be formally in place by April 2022, with a Shadow System Board established by October 2021. The Shadow System Board and System Board will have an Independent Chair which will need to be recruited to.

A key part of our Locality Construct will be the appointment of a Place Lead for Rochdale which will need to go through a formal process.

- 1.6 This report seeks to formalise the Shadow System Board for Rochdale Borough with effect from October 2021; agreement to the terms of reference for the Board; and appointments to the Shadow System Board.

Recommendation

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| 2.1 | To approve the establishment of a Shadow System Board including the draft Terms of Reference and Locality Construct (as detailed in Figure 1 and Appendix 1). |
| 2.2 | To approve appointments to the Shadow System Board (as detailed in Appendix 2). |
| 2.3 | To retain existing arrangements for the Integrated Commissioning Board until end March 2022. |
| 2.4 | To approve the commencement of the recruitment process for the Independent Chair of the Shadow System Board (acknowledging the dual role as Independent Chair for the ICB until end March 2022), delegating authority to the Chief Executive / Accountable Officer to agree the Job Description |
| 2.5 | To note that the Council will be requested to approve the disestablishment of the Strategic Place Board (in so much the powers of the Health and Wellbeing Board) and Integrated Commissioning Board from 31 March 2022; with a further report to Council following Royal consent of the White Paper. |
| 2.6 | To note the significant work required regarding funding flows to System Board prior to seeking delegations from Council Cabinet for 2022/23. |

Reason for Recommendation

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| 3.0 | Following the publishing of the Integration and Innovation White Paper earlier in the year there is a requirement to establish statutory integrated health and care systems (ICS) which will require changes to the current system. |
| 3.1 | The governance framework is framed under the Local Government Act 1972. As a statutory Joint Committee formed by the two statutory organisations all members must comply with the requirements set by the Local Government Acts 1972 and 2000 and the Council's Constitution. The Council is committed to maintaining the established good governance |

practices that have been established where legislation allows. The SPB and ICB will end and the System Board will be formed as a new committee based on the principles of the ICB in collaboration with GMICS.

- 3.2 The establishment of a Shadow System Board is the way in which the Rochdale Locality is proposing to facilitate this requirement.

Key Points for Consideration

4.0 Key information / Considerations

White paper and Guidance

- 4.1 The White Paper and associated guidance sets out several key considerations and timescales that have been taken into account in the development of the locality construct and the GM ICS. These are set out below:
- 4.2 Clinical Commissioning Groups will cease at the end of March 2022 and a single GM ICS will be established from 1 April 2022 (subject to legislation), although shadow arrangements may be in place as early as Q3 2021/22.
- 4.3 There is a requirement for the functions of Health and Wellbeing Boards to continue but it does not specify how this must happen. In other words, the functions of the Health and Wellbeing Board must remain but can be enacted through alternative governance arrangements. The proposal for Rochdale is that these functions are delivered through both the System Board and the People and Place Partnership which is a sub group of the System Board.
- 4.4 It is recognised that some CCG functions may sit at a Greater Manchester level within the GM ICS. Rochdale system leaders are actively engaged in working with GM and all other localities to define the functions that will be held at GM level and those that will be retained locally, with a clearly stated ambition to retain as much resource and expertise as possible in the locality.
- 4.5 The ICS will have two main bodies (Draft GM ICS Governance arrangements are provided in Appendix 3):
- **ICS Partnership:** Each ICS will have a Partnership at system level established by the NHS and local government as equal partners. The Partnership will operate as a forum to bring partners (local government, NHS and others) together across the ICS area to align purpose and ambitions with plans to integrate care and improve health and wellbeing outcomes for their population.
 - **ICS NHS bodies:** will be established as new organisations that bind partner organisations together in a new way with common purpose. They will lead integration within the NHS, bringing

together all those involved in planning and providing NHS services to take a collaborative approach to agreeing and delivering ambitions for the health of their population.

Local Arrangements

- 4.6 Taking the above considerations into account the Rochdale system has been developing its locality construct (figure 1 above) and proposes the following:
- 4.7 Currently joint integrated commissioning decision making for Health and Care is enacted through the Integrated Commissioning Board (ICB) which was established by NHS Heywood, Middleton and Rochdale Clinical Commissioning Group (HMR CCG) and Rochdale Borough Council (RBC) as a sub-committee of the Strategic Place Board, pursuant to the NHS Bodies and Local Authorities Partnership Regulations 2000 as amended, and derived its authority and decision making powers from the two organisations.
- 4.8 It is proposed to have a System Board in place for the 1st April 2022 which will replace the Strategic Place Board (Health and Wellbeing Board elements) and the Integrated Commissioning Board as the body which will be responsible for bringing together systems to support integration and develop a plan to address the systems' health, public health, and social care needs.
- 4.9 To support the development of the System Board it is proposed that a Shadow System Board is established from October 2021. This will provide the opportunity for the system to come together to jointly contribute to our Health and Care decision making. Given that at the present time there isn't clarity around the delegations which will come to localities from the GM ICS it is not possible to clearly outline the requirements for delegations to the Shadow System Board. It is therefore proposed that the Integrated Commissioning Board continues under the existing delegations that are currently delegated to the SPB (Health and Wellbeing Board elements) and ICB (as detailed in Appendix 4) until the end of March 2021. Therefore, the Shadow System Board will have no formal decision making but, by virtue to membership arrangements, will contribute to the decision making at ICB.
- 4.10 It should be noted that significant work will need to be completed across the system once delegations from the GM ICS are more clearly understood taking account of any subsequent guidance. The flow of funds across the system and how these will be brought together at System Board will need to be fully understood prior to seeking delegations from Council for 2022/23.
- 4.11 The role of the Shadow System Board will be to:

- Set the strategic direction for the Borough, utilising Public Health led data and intelligence to inform decision making and reduce health inequalities.
- Be accountable for the pooled budget and have shared oversight of the Rochdale £ to ensure the most effective use of public resources.
- Hold the system to account for delivery of Health and Care provision for the Borough to ensure delivery of agreed outcomes. (Assurance mechanisms to be determined)
- Operate as the strategic interface into the Greater Manchester Integrated Care System (GMICS), regional and national systems.
- Seek assurance on the delivery of system wide statutory duties including, but not exclusive to, reducing health inequalities, quality and safety of services, performance targets and financial arrangements.
- Develop strong links with the wider Public Sector Reform agenda and operate under the GM Public Sector Reform Principles as outlined below
- Oversee the development of and transition to a new locality System Board.

4.12 A single recruitment process will need to take place to establish an Independent Chair for the Shadow System Board and the subsequent fully established System Board. In addition to taking on the role for the Shadow Board from October the new Independent Chair will have the dual role of Independent Chair for the ICB from October 2021 until it is disestablished at the end of March 2022. This will support consistency between the Shadow System Board and ICB in this interim period.

Alternatives Considered

- 4.12 The White Paper indicates that the ICS will have to work closely with local Health and Wellbeing Bodies as they have the experience as ‘place-based’ planners. That requires the ICS NHS Body to have regard to the Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies that are produced by the HWBB. However, it is not expected that HWBBs will necessarily need to form the structure on which the ICS Health and Care Partnership is based and is for local determination. Those functions which relate to section 75 integrated funds and are currently delegated to the ICB will be required to transfer.
- 4.13 The proposal is to incorporate the functions of the HWBB into the new Locality Construct but could remain as a standalone function working in conjunction with the ICS. However, given the development of the People and Place Partnership sub group as detailed in the paper and the

establishment of the System Board it is considered that these two components of the locality construct adequately cover the functions of the HWBB.

Costs and Budget Summary

5. There are no financial implications as part of this report

Risk and Policy Implications

6. In here, highlight any risks associated with the report. These could be legislative; equality focused; personnel; asset management. Are there risks associated with taking this course of action, or equally, if we don't take the course of action, what will the risks be?

Will there be any additional impact on Council policy? If so, what will they be Could it affect another service area? If so, how (discuss this with colleagues from other services, where appropriate and highlight any implications/how they will be addressed.

Consultation

- 7.0 The White paper for Innovation and integration follows the previous green paper 'Integrating care: next steps to building strong and effective integrated care systems' which was out for public consultation between December 202 and January 2021.
- 7.1 This paper outlines the local response the implications outlined in the White Paper for 'Innovation and integration' and will be presented to the following committees prior to final approval:
- Leadership – 31st August 2021
 - Health and Schools Overview and Scrutiny Committee – 8th September 2021
 - Strategic Place Board – 14th September 2021
 - Governing Body – 17th September 2021
 - Informal Cabinet – 30th September 2021
 - Council – 13th October 2021
- 7.2 An Equality impact initial screening has been completed. At this stage a full EIA is not consider as a requirement. As further information is made available via the GM ICS and national policy this will be reviewed to ensure the delegations once received do not negatively impact on any protected characteristics.

Background Papers

Place of Inspection

8. Here you should detail any background papers –	Integrated Commissioning Directorate - N1Riverside
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